Under the Pagawork Reduction Act of 1995, no persons are required

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T-854 P.QQ3

MAY PT OSE/23 TOP CO.

V.S. Palent and Trademark Disce; U.S. DEPARTMENT OF CONDUCTOR

BOTO 9 8 CONCEDUD OF MORRORISM AS Extreme a settleme.

FEMION	PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136			Docket Number (Optional) 20002.0015	
İ		In re Application of I	of P. Puniello et al.		
-		Application Number	09/764,110	Filed January 19, 2001	
1		For Apparatus and	s and Method for Molding Golf Balls		
		Art Unit 1732	Examiner E. L	98	
ioeumea si	ppication.			I for filing a reply in the above	
THE FEQUES	ted extension and appropri		are as follows (c	check time period desired):	
	One month (37 CFR			\$	
	☑ Two months (37 CFR 1.17(a)(2))			\$ <u>420</u>	
	Three months (37 C	FR 1.17(a)(3))		\$	
	Four months (37 Ci	R 1.17(a)(4))		\$	
ı	Five months (37 CF			\$	
	Applicant claims small entit	y status. See 37 CFR 1	27. Therefore, i	the fee amount shown	
	above is reduced by one-hat A check in the amount of the	alf, and the resulting fee ne fee is enclosed.	is: \$		
	Payment by credit card. Fo	rm PTO-2038 is attache	d. ·		
	The Director has already be	en authorized to charge	fees in this app	dication to a Deposit Account,	
i	The Director is hereby auth				
<u> </u>	or credit any overpayment,	to Deposit Account Nurr	ber <u>19-5127, Or</u>	rder No. #	
	have enclosed a duplicate				
lamt					
		rd of the entire interest.			
04 ROSS1 00	Statement un Statement un SPASSA STATE	der 37 CFR 3.73(b) is er 18 record. Registration	nclosed. (Form Number	PTO/SB/96).	
52 420.0	00 DA 🗌 attorney or agen	t under 37 CFR 1.34(a).			
	Registration num	iber if acting under 37 CFR 1.3	H(=)		
· WARNI Include	NG: Information on this f at on this form. Provide o	orm may become publicated transformation	c. Credit card and authorizat	Information should not be ion on PTO 2038.	
	May 18, 2004		•	$\langle \mathcal{Y} \rangle$	
-	Date	_		Signature	
	202-424-7500		_1	John P. Muglrew (47,809)	
`I	Telephone Number			Typed or printed name	
NOTE: Simon	ou of all the leastern or medican	of record of the codin income	or their management	ra(a) are required. Submit multiple forms if	

including gamering, preparing, and subminishing the complexed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete this torm analor suggestions are recursing this burean, should be sent to the Chief Information Officer, U.S. Parent and Trademak Officer, U.S. Department of Commences, P.O. Box 1450, Alexandria, VA 22312-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450,

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.